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JA	JAN 17 2006 17 FR THOMSON LICENSING 609 734 6888 TO 8, 15712732885, 53 P. 01							
	PART B - FEE(S) TRANSMITTAL							
Co	Complete de send this orm, together with applicable fee(s), t				P.O. Box 1450 Alexandria, Virginia 22313-1450			
CI	CUSTOMER NO.: 24498				(SE4) ART TOOK		ould be completed where	
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JOSEPH S. TRIPOLI THOMSON MULTIMEDIA LICENSING INC. 2 INDEPENDENCE WAY					I hereby certify that this States Postal Service w addressed to the Mail	I hereby certify that this Fee(s) Transmittal is being deposited in an envelope States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile addressed to the USFTO (571) 273-2885, on the date indicated below.		
P.O. BOX 5312					Patricia M.	Fedorowycz	(Bipters)	
PRINCETON, NJ 08543-5312 01/18/2006 TBESHAH2 00000049 070832 09944308					Tothicis !	1 Jehreur	(Signature)	
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01 FC:	1501 1400.0	O DA	F	IRST NAMED IN	VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
03 FC	3 PC-8804 15 00 00				Betz	PU010158	2165	
09/944,308 13.00 PH 08/31/2001 Steve Craig Betz TITLE OF INVENTION: MULTIPLE FUNCTION MODEM INCLUDING EXTERNAL MEMORY ADAPTER								
TITLE OF INVENTION: MULTIPLE FUNCTION BIODESIA BIODOSIA								
						and bill	DATE DUE	
Г	APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	02/03/2006	
L	nonprovisional NO		\$1400		\$300	\$1700	02/03/2000	
Г	EXAMINER ART UI PWU, JEFFREY C 214			T	CLASS-SUBCLASS	ل		
L				709-216000				
Use a fidination of "Fee Address" (37 2. For printing on the patent front page, list JOSEPH J. LAKS							PH J. LAKS	
CFR 1.363). (SEE AMENDED ADDRESS ABOVE) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.					(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a			
	"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. It all assignee is the patent of the patent o								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
THOMSON LICENSING					Boulogne-Billancourt, France			
Please check the appropriate assignee category or categories (will not be printed on the patent):								
4a. The following fec(s) are enclosed: 4b. Payment of rec(s): A check in the amount of the fec(s) is enclosed:								
✓ Issue Fee ✓ Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies 5				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-0832 (enclose an extra copy of this form).				
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (it required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.								
Authorized Signature Luxth Eur					Date	anuary 17, 200	6	
Typed or printed name GUY H. ERIKSEN (609) 734-6807 Registration No. 41,736							(and by the LISPTO to process)	
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